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Attention: MAIL STOP: AF

Company: USPTO

Re: App. No. 09/550,686; Docket No. 2000-0026

Cover Message:

Please find a response attached in the  
above-referenced case.

Respectfully submitted,

The Law Office of Thomas M. Isaacson

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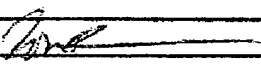
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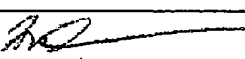
PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031  
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/550,666
	Filing Date	April 17, 2000
	First Named Inventor	Julia Hirschberg
	Art Unit	2654
	Examiner Name	Lamont M. Spooner
Total Number of Pages in This Submission	Attorney Docket Number	2000-0026

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Thomas M. Isaacson, Reg. No. 44166	
Signature		
Date	September 1, 2005	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Thomas M. Isaacson		
Signature		Date	September 1, 2005

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: :  
: :  
Julia Hirschberg : Attorney Ref.: 2000-0026  
: :  
Serial No.: 09/550,686 : Confirmation No.: 1854  
: :  
Filed: April 17, 2000 : Art Unit: 2654  
: :  
FOR: SYSTEM AND METHOD FOR : Examiner: Lamont M. Spooner  
INDEXING VOICE MESSAGES BY :  
SPEAKER :

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**AMENDMENT AFTER FINAL**

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Dear Sir:

Responsive to the Final Office Action, dated July 1, 2005, kindly enter the following proposed amendment and remarks.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 8 of this paper.